

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTHState File No. 145Registered No. 487

1. PLACE OF BIRTH

County GilaState Arizona

District or Township

or Village

City MiamiNo. Miami - Inspiration Hospital

St.

Ward

2. Full name of child John Sarsfield Conniff

If birth occurred in a hospital or institution, give its NAME instead of street and number)

If child is not yet named, make supplemental report, as directed.

3. Sex of Child

To be answered ONLY
in event of plural
births.male

4. Twin, triplet or other

6. Legitimate?

7. Date

of birth August 12 1930
Month Day Year

5. No., in order of birth

yes

8.

FATHER

Full name John Sarsfield Conniff

9. Residence

(Usual place of abode)

If non-resident, give place and state.

Miami, Arizona

10. Color or race

White11. Age at last birthday 35 (Years)

12. Birthplace (city or place)

(State or country)

Montgomery
Alabama

13. Occupation

Nature of Industry

Mining Engineer
Copper

14.

MOTHER

Full maiden name Grace Irene Higgins

15. Residence

(Usual place of abode)

If non-resident, give place and state.

Miami, Arizona

16. Color or race

White17. Age at last birthday 30 (Years)

18. Birthplace (city or place)

(State or country)

Leadville
Colorado

19. Occupation

Nature of Industry

Housewife20. Number of children of this mother 4(Taken as of time of birth of child herein
certified and including this child.)(a) Born alive and now living 4(b) Born alive but now dead 0(c) Stillborn 0

21. Were precautions taken against ophthalmia neonatorum?

yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was alive at 10:10 P m. on the date above stated.

(Born alive or stillborn)

Signature J. J. Miller

(Physician or midwife.)

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Given name added from
a supplemental report.

Month, day, year

Address Miami, ArizonaFiled Aug 30 19 30Registrar E. E. Jones

Registrar

136-812-782